

P.O Box 1325-00200, Nairobi Tel: 0713 805 770 0771 878 920 Greatwide Mall 2nd Floor.

Email: info@acumensacco.co.ke : acumensacco@yahoo.com

SHARES TRANSFER AGREEMENT FORM

L		/IEMBER		
NOID/PASS	SPORT NO	HEREBY TRANSFER		
MY(NC	OF SHARES) SHARES WO	ORTH		
KSHSHEL	D IN ACUMEN SACCO LTD	l .		
TOID/PASSPORT NOKSHS	FOR CONSIDER	M/NOOF ATION OF		
THE TRANSACTION WAS CONCL	LUDED ON\\20			
I HAVE RECEIVED THE CONSIDERATION IN FULL ON\\\\.20AND WE PUT OUR SIGNATUR <mark>ES IN</mark> ATTESTATION OF THE SAME.				
TRANSFEROR				
NAME				
ID NO				
SIGNATUREDA	те			
TRANSFEREE				
NAME SAVING & CO	M/NÔ	Ne bockey are		
ID NO				
SIGNATUREDATE	Ξ			
WITNESSED AND APPROVED B	Y:			
(Must be the Accountant, Acumen Sacco Ltd)				
NIANAT	CIONATURE	DATE		



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DEPOSITS TRANSFER AGREEMENT FORM

I	MEMBER		
NOID/PAS	SPORT NOHEREBY TRANSFER MY DEPOSITS		
KSHSHE	LD AT ACUMEN SACCO LTD		
то			
NOFC	R CONSIDERATION OF KSHS		
THE TRANSACTION WAS CONCLUDED ON\20			
I HAVE RECEIVED THE CONSIDERATION IN FULL ON\20\20			
TRANSFEROR			
NAME	M/NO		
ID NO			
SIGNATURE	DATE		
TRANSFEREE	. Acumen		
ID NO.	adit Co-operative Society Ltd		
SIGNATURE	DATE		
WITNESSED AND APPROVED BY:			
(Must be the Accountant, Acumen Sacco Ltd)			
NAME	CICNATURE DATE		